Authorized Signature

Typed or printed name _

Charles W. Fallow

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEB and PUBLICATION FEB (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

indicated unless correct maintenance fee notifies		herwise in Block I, by (a) specifying a new co	OFTER	pondence address;	and/or	(b) indicating a separ	etc "FEE ADDRESS" for
CURRENT CORRESPOND	DENCE ADDRESS (Note: Use B	PE	Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission 1 hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
	7590 04/16 R AND MATTAR CE ROAD - SUITE IG. MD 20910	0 2 2008						
		A CONTRACTOR OF THE PROPERTY O	AA DEN		Robyn F. B	adma	n ,	(Depositor's name)
			A COLOR		Kolyns	X 16	edma-	(Signature)
				L	July 9, 20	08		(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR		ATTOR	NEY DOCKET NO.	CONFIRMATION NO.
10/533,403	05/23/2005		Robert Carrington Smith			State 6	1111565312 AGGGGGA	2 10211(2207
10/533,403 05/23/2005 Robert Carrington Smith TITLE OF INVENTION: METHOD AND APPARATUS FOR CLEANING FLUIDS ### 10/533,403 05/23/2005 Robert Carrington Smith ### 10/53,403 05/23/2005 Robert Carrington Smith ### 10/53,403 05/23/2005 Robert Carrington Smith ### 10/53,403 05/23/2005 Robert Carringt								
					01 FC: 02 FC: 03 FC:	1504	720.00 DA 300.00 DA 9.00 DA	
APPLN. TYFF	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE	E FTEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300		\$0		\$1020	07/16/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS	;				
COOLEY, CHARLES E		1797	494-049000		•		•	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list SHOFMAKER AND MATTARE					
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,					
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print o	r typ	e)			
PLEASE NOTE: Un recordation as set for	less an assignee is ident thin 37 CPR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the data will appear on the DT a substitute for filing	he րա Էստ	atent. If an assignous assignment.	ee is ido	entified below, the do	cument has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Lubemaste	er Australia	Ltd.	Mount Louis	sa,	Queenslan	đ, Aı	ustralia	
Please check the appropr	riate assignee category or	categories (will not be p	rinted on the patent):		Individual 🖾 Co	προιετίο	n or other private grou	p entity Government
4a. The following fee(s)	are submitted:	4	b. Payment of Fee(s)::(Plea	se first reapply an	ıy previ	ously paid issue fee si	nown above)
S Issue Fee			A check is enclosed.					
Publication Fee (No small entity discount permitted)			Payment by credit card, Form PTO-2038 is attached.					
KI Advance Order - # of Copies3			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-2110 (enclose an extra copy of this form).					
5. Change in Entity Sta	tus (from status indicate	d above)						
	IS SMALL ENTITY SUM		☐ b. Applicant is no	long	er claiming SMAL	L ENTI	TY status. See 37 CFI	R 1.27(g)(2).
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if requestroords of the United Sta	nired) will not be accepted	od from anyone other the Office.	an th	e applicant; a regis	stered at	tomey or agent; or the	assignee or other party in

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete; including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Alexandria, Virginia 22313-1450. DO NOT SEND FBES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450.

July 2, 2008

Registration No. 28946

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.